

Wm H. Thomas -

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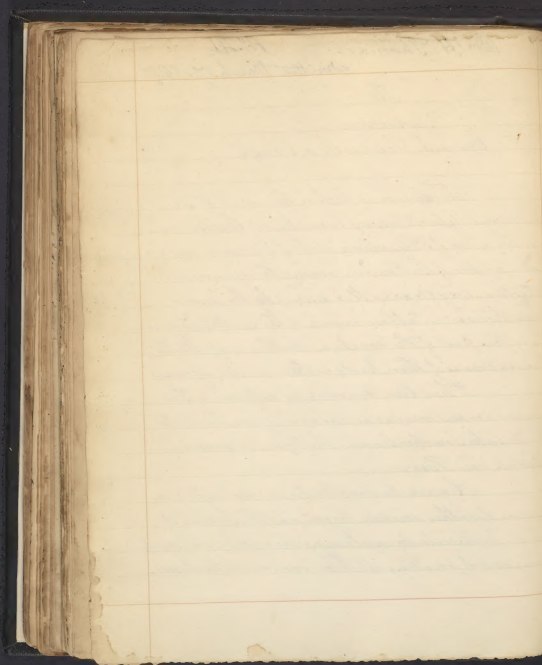
I

Dissertation on
Cynanche Trachealis or Croup

The disease which is the subject of the following Dissertation is placed by Dr Cullen under the order of Phlegmonia, class of Pyrexia, and by our Professor of the Practice among the diseases of the Respiratory Organs. It is defined by the former gentleman as Inflammation of the Glottis, Larynx or upper part of the Trachea, whether it affects the membranes of these parts, or the muscles adjoining.

It has been denoted by different authors under various names, as Angina Plethorica, Tracheitis, Cynanche Trachealis, and the popular name of Croup and Hoarseness.

Cynanche Trachealis is considered as a disease of rather modern origin, and the honour of more particularly explaining its nature and symptoms, and of pointing out those remedies which suc-



could best in its cure, has been given to Dr. Horn of
Edinburgh.

Cynanche Trachealis is confined in its attacks
to early life. Children from the first to the fifth year
(particularly the ruddy and robust) are more frequently
affected by it: it has been known to affect children
within the month, and even adults are not beyond its
reach: the latter cases are extremely rare, so much so,
that the disease may be considered as confined to chil-
dren, and may with propriety be classed among the
diseases incident to childhood.

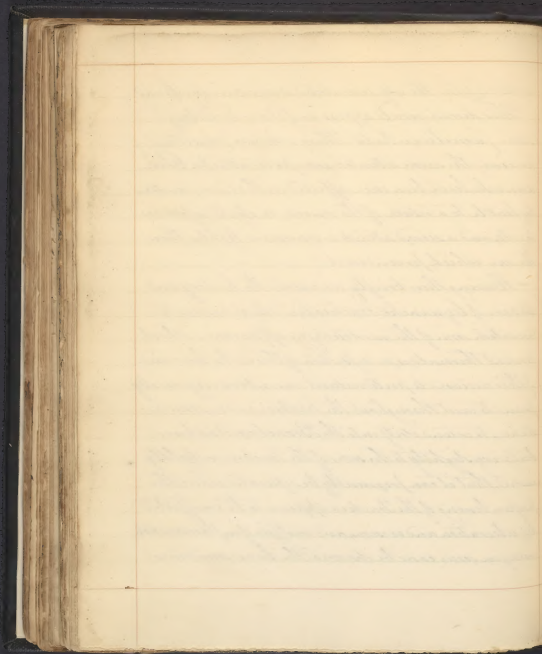
It is I believe generally admitted that our disease
is not contagious, although it may prevail as an
Epidemic at certain seasons of the year. One pecu-
liarity in the disease before us is, its being endemial to
some particular places and confined to very narrow
limits. This is proved by the fact, that at Edin-
burgh it is hardly ever known, while at Leith it
prevails to a great degree: in Baltimore it is scarcely
ever seen, whilst Philadelphia which is only a small

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distance from the city is dissipated every succeeding spring.

This disease would appear as if it was hereditary to some families, whilst others who are placed in precisely the same situation, escape its attacks. Children who have been once affected with it, are peculiarly liable to a return of the disease on slight exposures to cold, and a second attack is considered lighter than the one which preceded it.

Having thus briefly considered the history and nature of Cynanche Trachealis, I shall proceed to mention some of the most striking appearances which present themselves, on dissection of those who have died of this disease. A preternatural membrane is generally found to exist throughout the Trachea, and in some instances to extend itself into the Bronchiae: it adheres but very slightly to the sides of the Trachea, so slightly indeed, that it can frequently be separated entire: the proper lining of the Trachea appears to be unaffected by ulceration and erosion, and vestiges of inflammation may in some cases be observed. The lungs sometimes



show no vestige of the disease, and at others are affected with inflammation resembling that of *Pneumonia Notha*. This peritornatural membrane according to Professor Lorry's dissection, never so completely fills up the Trachea as to prevent breathing; he has always found the muscles of the Glottis and Epiglottis so much contracted, as to induce him to believe the difficulty of breathing arose from that cause.

Of the exciting cause. The most frequent exciting cause of *Cynanche Trachealis*, appears to be the application of cold: sudden vicissitudes of the weather appear also to favour attacks of this disease: hence the Spring and Autumn are the seasons in which it is most prevalent: low marshy situations, and those near the sea coast where there is a greater proportion of moisture in the atmosphere are thought to be peculiar to this disorder.

What effect a disordered condition of the Alimentary Canal may have in producing this disorder, I shall not pretend to determine: the strong sympathy which exists between it, and the other parts of this system, would

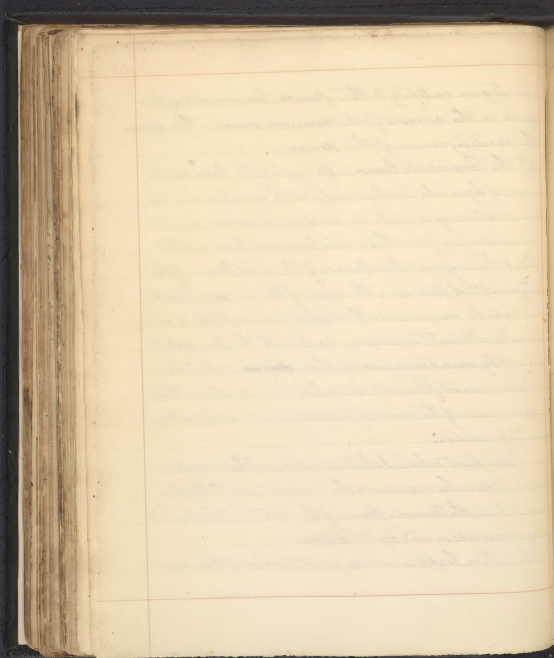
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tend to give validity to this opinion. Underscored in his work on the disease of children, commemorates this among the exciting causes of this disease.

Of the Proximate Cause. As regards the proximate cause of Croupous Tracheitis not a little confusion has been introduced into every one who has ventured to advance an opinion disagreeing from those who preceded him. As this point has engaged the attention of the most learned of the Medical Profession since the origin of the disease it would perhaps be considered as the highest presumption in me, were I to attempt to advance one. I shall therefore content myself by mentioning some of those *opinions*, which have appeared most plausible and which have enlisted in their defence men of the soundest judgement and most extensive information.

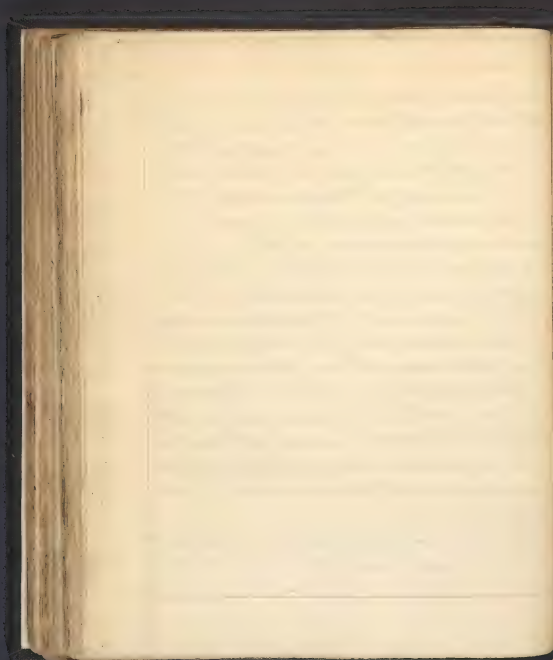
The first which I shall mention is that advanced by Dr. Home: he considered the original seat of the disease, to be in the mucous glands of the Trachea: I shall quote his own words as cited by Dr. Willson

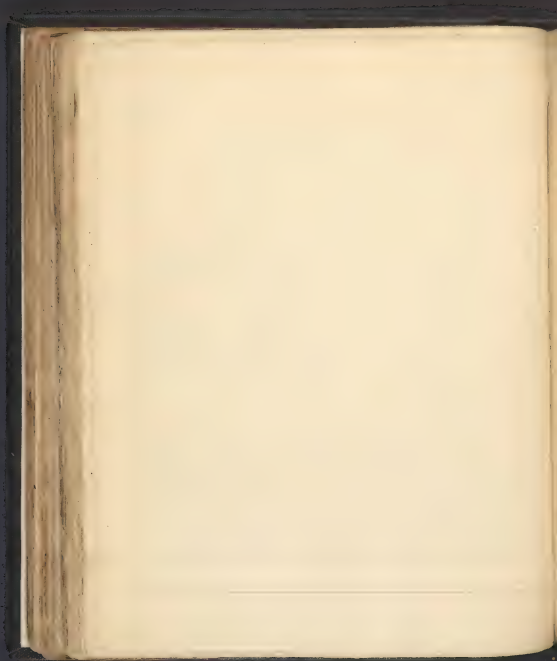
"When there happens a very great secretion of this viscu-



but does not so entirely surround the larynx as to be
either not so thoroughly closed, or so far as to be kept
the same parts in contact, during expiration, while the
more anterior part of the trachea is by the contraction
of the surrounding of the Globus of force to the case of the in-
crease of the air, every circumstance encourages its con-
traction into a still more contracted state, while the more internal
parts of the trachea continue to be kept in their usual
condition of more perfect separation from the parts below.
When then coincides with the former position, and con-
cides the substance formed by the excitement of the
force of the trachea, as the cause of Croup, tracheitis
Croup, though the disease is in an inflammation
of the larynx, together with a spasmodic contraction of the
Globus, which last affection he considered as the most
common, peculiar circumstances, as subjects very fre-
quently, which form the common origin of inflam-
mation.

The late Dr. Rush considers the disease to be brought
by a spasmodic affection, and objects entirely to the use

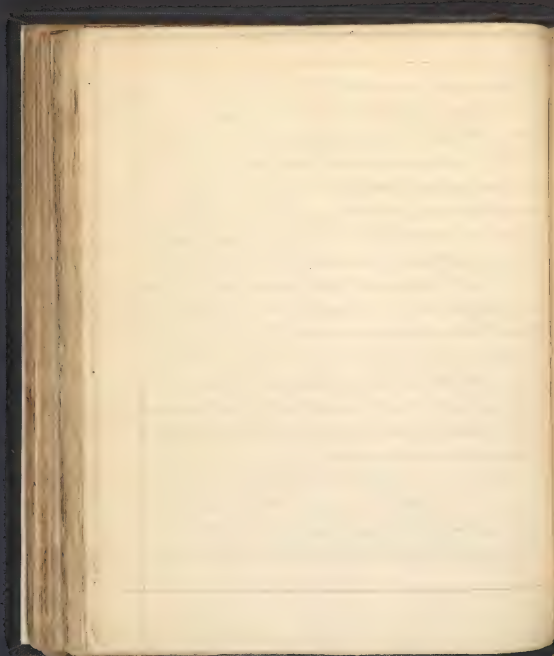




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The next morning the publisher had my
manuscript, and this day, from the other witnesses.

in the plan of the general arrangement of the system, are
the following. The reduced day is to be the same for all



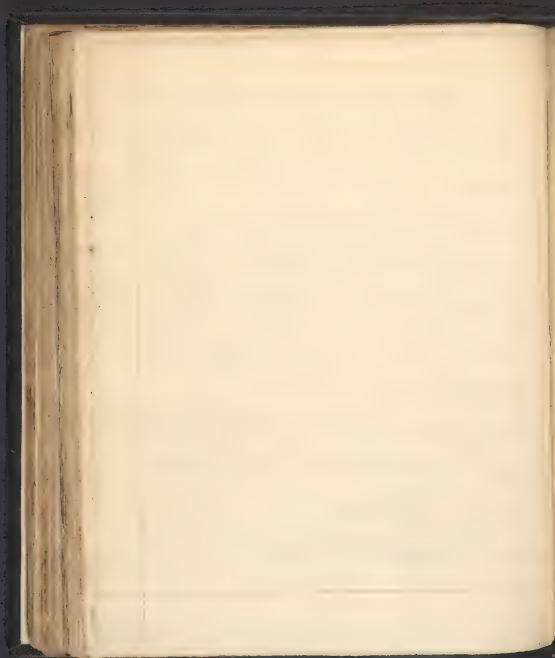
It was the solution in accordance with which I
was sent to the same time as a
with an ability for action and a
with the most perfect in the most
with success in the

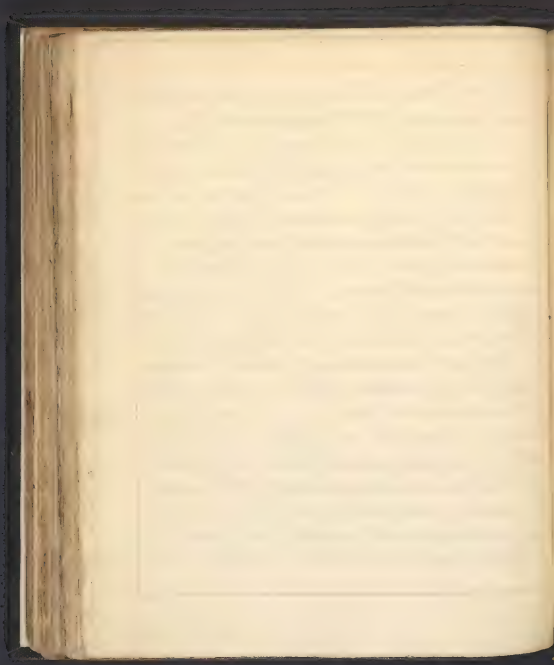
After midnight I went out to the morning room
to find the table covered in newspapers, and
a number of men were frequent the room as
usual. The day opened a fine one, and the
low ebullience among the registration bureau and
the more difficult the registration bureau work was
not so scarce to be counted, and the ebullience becoming
a sure precursor of a total termination.

The more intense the stimulus, however, the more the sensation becomes more, in and for itself, the volume of the voice an exact measure, as the pulse becomes softer and less frequent.

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The symptoms of *Cymarchia Trachetis* being more
dramatic than the *Trachetis*, the immediate death

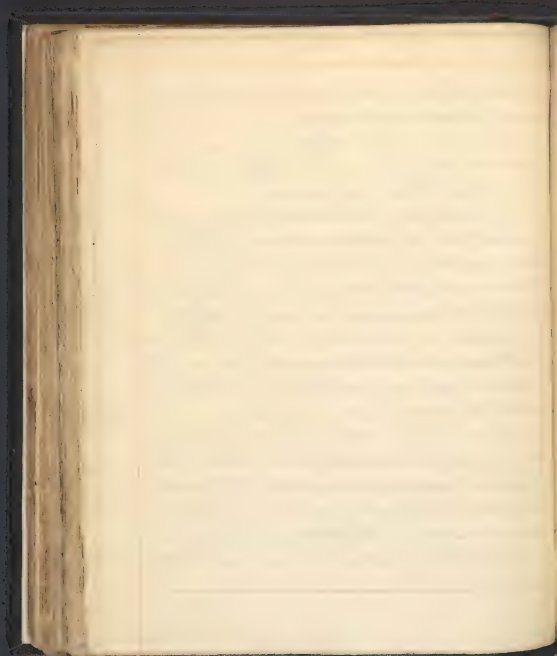




in most cases to be followed by a violent inflammation, which
are to be regarded accordingly as circumstances to be
in other cases we shall seldom have cause to be
other than a loss of the effects, & child has
ever did make half a grain.

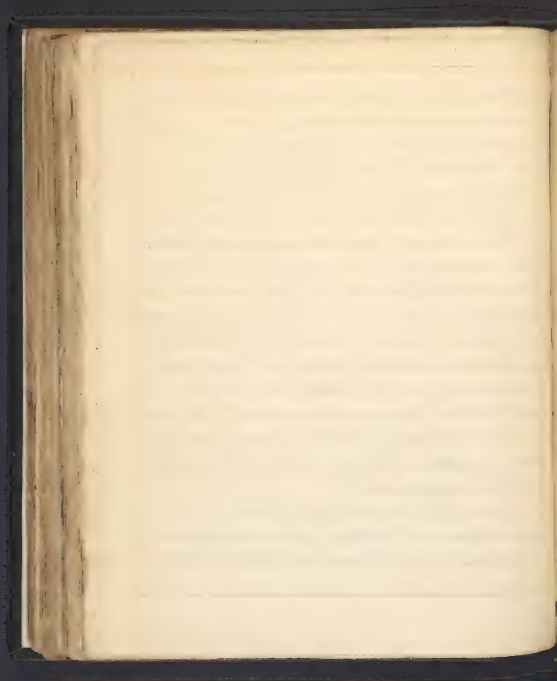
At the same time that we exhibit the above remedy,
we would place the patient in a warm bath, and con-
tinue him therein for ten, fifteen or twenty minutes.
This is a most useful remedy of fevers, the operation
of the emetic, purgative, excretion, and has of itself in
many instances entirely removed the disease. The warm
bath I am inclined to believe would be even a more
useful remedy in many other diseases of children, in
which it is seldom or never resorted to.

The disease will sometimes yield to these remedies,
however we should be disappointed, we should at least
be copious emetic and a repetition of the emetic
in warm bath. The most effects we are to anticipate
from venesection are the following, viz. invasion, the
destruction of inflammation, abating the fever.



After the termination of the epidemic
 mildew it is so difficult to distinguish
 from the ordinary cold or influenza.
 The attack must be extremely insidious, and
 on this respecting Case No. 1, we are not unimpaired
 or well satisfied. It is evident that even when
 the case is reported, and the whole of the
 there remains the possibility of the disease being
 more severe but stimulate in the second instance
 to call up a new and the virus increases from, and
 new. Supposed depletion by means of cups and leeches
 would rather expect our, improve in the appearance
 for a short time increase to extend from ear to ear
 at this time be of eminent advantage. The last
 after depletion on the principle of the disease exciting
 inflammation on the external parts, and thereby relieving
 the more deep-seated.

But even these additional difficulties will surely
be removed as we reach, and to our great modification we
can then direct our action upon our patient with safety.



trides. In this embarrassing and critical situation, we are advised to bleed ad deliquium Animi: when carried to this extent we are assured that it never fails to produce immediate relief. Pushing the lancet to this extent would seem to smother the thoughts of madness, and the patient would by then be considered as irrevocably lost. Yet if they would take into consideration the great tenacity which children have been observed to display for life, they would doubtless consider this apparently rash procedure, as the only alternative left, by which life could be preserved.

"Children have been found alive upon the breasts of their mothers, who had perished of cold: they resist contagion better than adults, and recover sooner from contagious diseases: from injuries and surgical operations their recovery is more rapid: they are likewise better able to bear the operation of the most powerful medicines. It is well known that during the growth of the human body, the proportion of fluids far exceeds that of the solids, and on account of the fluidity of the vessels of children, they are extremely liable to inflammatory diseases of this kind.

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and therefore often require venesection.

I have never seen a case where the symptoms have not readily yielded to Emetics, warm bath, blisters, and moderate venesection: yet should not hesitate a moment bleeding to the extent advised, if required.

It is soon convinced owing to the mistaken idea of children being unable to bear the operation of powerful and efficient remedies, that this disease has proved so fatal and has been mislabeled among the *Ephoræa Medicorum*.

The disease being by the above remedies completely broken down, we are next to resort to purgative medicines in order to carry off its lingering remains. Of this class Calomel is most generally employed, and is certainly preferable to any of its kindred articles. In such high estimation has it been held by some, that it was relied on, as the only sure and effectual remedy in combating Cynanche Trachealis.

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